### Application Data She t

Secrecy Order in Parent Appl.::

# **Application Information** Application number:: Filing Date:: 07/22/03 Application Type:: Regular Subject Matter:: Utility Suggested classification:: Suggested Group Art Unit:: CD-ROM or CD-R??:: Number of CD disks:: Number of copies of CDs:: Sequence Submission:: Computer Readable Form (CRF)?:: Number of copies of CRF:: Title:: PER-PIXEL OUTPUT LUMINOSITY COMPENSATION Attorney Docket Number:: 019680-005700US Request for Early Publication:: No Request for Non-Publication:: Yes Suggested Drawing Figure:: **Total Drawing Sheets:** 9 Small Entity?:: No Latin name:: Variety denomination name:: Petition included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers One::

No

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## **Applicant Information**

Name Suffix::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Richard

Middle Name::

Family Name:: Clark

City of Residence:: Kirkland

State or Province of Residence:: WA

Country of Residence:: US

Street of Mailing Address:: 6026 105th Avenue NE

City of Mailing Address:: Kirkland

State or Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code of mailing address:: 98033

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

David

Middle Name::

R.

Family Name::

Morey

Name Suffix::

City of Residence::

Chapel Hill

State or Province of Residence::

NC

Country of Residence::

US

Street of Mailing Address::

6817 Hunting Ridge Road

City of Mailing Address::

Chapel Hill

State or Province of mailing address::

NC

Country of mailing address::

Postal or Zip Code of mailing address:: 27517

## **Correspondence Information**

Correspondence Customer Number::

20350

#### **Representative Information**

Representative Designation::

Representative Number::

Representative Name::

Primary

37,495

Babak S. Sani

Associate

51,588

Cathy E. Cretsinger

#### **Domestic Priority Information**

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

#### For ign Pri rity Information

Country::

Application number::

Filing Date::

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## **Assigne Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::